"Express Mail" mailing label number _EV324783036US _. PTO/SB/01 (6-95) Approved for us through: 10/31/98 OMB 0651-0032 Type a plus sign (+) inside this box + Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE 0010/PTO U.S. Department of Commerce Attorney Docket U 0192 OS/MINAP Rev. 6/95 Patent and Trademark Office <u>Number</u> First Named Inventor SUDDERTH, R. Brantley **DECLARATION FOR COMPLETE IF KNOWN** UTILITY OR DESIGN **Application Number** PATENT APPLICATION Filing Date Declaration OR Declaration **Group Art Unit** Submitted Submitted after with Initial Filing **Examiner Name** Initial Filing As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: LOW VISCOSITY COPPER SOLVENT EXTRACTION REAGENT FORMULATIONS (Title of the Invention) the specification of which is attached hereto x was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56. I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed. Prior Foreign Application Number(s) Country Foreign Filing Date (MM/DD/YYYY) Priority Certified Copy Attached? Not Claimed YES NO Additional foreign application numbers are listed on a supplemental priority sheet attached hereto: I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below. Additional provisional Application Number(s) Filing Date (MM/DD/YYYY) application numbers

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

are listed on a supplemental priority sheet attached hereto.

09/26/2002

60/413,851

Type a plus sign (+) inside this box +		
·		

U 0192 OS/MINAP

	L	DECLAR	ATIU	<u> </u>			Page 2								
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §385® of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.															
U.	.S. Parei ation N	ent	PC	CT Pare Number	ent		Parent	Filin	ng Date			ent Pat	tent	t Numb	
								(if applicable)							
	Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and														
As a named Trademark (inventor, I i	hereby appoint the nected therewith:	e following a	attomey(s)) and/or	agent(s) to	o prosecu	te this	application	and to tra	ansac	all busin	iess ir	n the Pate	ent and
Firm Na	_								stomer o	or label			_		
		ame			stration mber				Name	.				Registr Numl	ration iber
John E. I Steven J Aaron R.	J. Trzask			32,89 36,29 42,51	96										
Addition	nal attorney	y(s) and/or agent(s	s) named or	n a supple	emental :	sheet atta	ched here	to.							
Please direct to:	ali corresp	xondence X	Customer Number	or l	label		236	<u></u> 57	i	OR	х	Fill in c addres	corres ss bel	spondence low	e
Name	Joh	hn E. Drach									_		_		
Address															
Address						-									
City	—					State					_	Zip			
Country			Telepho			5-628-14			Fa			215-628			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.															
		r First Inven	ntor:						A petitio	on has beer	n filed	J for this u	ınsigr	ned inven	tor
Given Name	R. Bra	antley		Middle Initial			amily Name	Su	Sudderth				Suf e.g.	ffix g. Jr.	
Inventor's Signature										Date					
Residence:	City Tu	ucson		State	AZ	=	Country USA				Ţ	Citizensh	nip	USA	
Post Office	Address	7164 N. Len	mmon Ro	ck Place	,										
P st Office	Address														
City Tuc:	son		State	AZ	Zip	85718	Coun	ntry	USA		1	Applicar Authority			
X Addi	itional inv	rentors are being	ig named r	on supple	ementa	il sheet(s) attache	d her	reto						

(+) inside this box + U 0192 OS/MINAP												NAP							
DECLARATION											ADDITIONAL INVENTOR(S) Supplemental She t								
Name of Additi nal Joint Invent r, if any:												A	petition ha	signed					
Giv i Nam		Ste	phe	n		Middle Initial	М	M. Fa		mily ime	7	Olafson				ffix 3. Jr.			
	ntor's ature		_									_		Date					
Resid	dence: (City	Tuc	son		State AZ			-	C	ountry	I	USA		Citizens	nip	USA		
Post Office Address 9670 N. Cliff View Place																			
Post Office Address																			
City	Tucs	ion			State	AZ	Zi	Zip 85737			Cour	ntry	USA		Applica Authori	nt ty			
Nan	ne of /	Addi	tion	nal Joint Inv	ventor	, if any	:					A in	petition has	s been file	ed for thi	s un	signed		
Giver Name		Phi	illip			Middle Initial		L.		Fan Nar	mily me	N	Mattison			Sut e.g	ffix Jr.		
Inven Signa	ntor's ature						_	_		_		_		Date					
R sic	dence: (City	Col	umbia Height	s	State		MN	1	C	ountry	I	USA		Citizenship		USA		
Post	Office A	Addres	38	2205 Innsbr	uck Pari	kway	_			_		_							
Post	Office A	Addres	38				_	_		_		_							
City	Colu	ımbia	Heig	hts	State	MN	Zij	p	55421	1	Country USA			Applicant Authority					
Nan	ne of /	Addi	tion	nal Joint Inv	ventor	, if any		ľ				A in\	petition has ventor	s been file	<u> </u>		signed		
Giver Name		Mic	chae	al		Middle Initial	J.		Fan Nar	mily me	V	/irnig			Suf e.g	ffix Jr.			
Inven Signa			_				_	_		_		_		Date					
Resid	dence: C	City	Tuc	son		State	State A			Cr	ountry	I	USA		Citizensh	nip	USA		
Post	Office A	ddres	is	5013 N. Ama	ıpola Dr	ive	_	_		_		_							
Post	Office A	vddres	iS				_	_				_				_			
City	Tucs	on			State	AZ	AZ Zij		ip 85745		Cour	ntry USA			Applica Authorit	ant rity			
Nam	ne of /	Addi	tion	al Joint Inv	/entor	, if any:	:]					A	petition has ventor	s been file	ed for this	s un	signed		
Given Name						Middle Initial	_	Fa Na		mily me	nily ne					ffix . Jr.			
Inventor's Signature Date																			
Resid	dence: C	City				State	\prod			Cr	ountry	I			Citizensh	ıip			
Post	Office A	ddres	s					_											
Post	Office A	ddres	s				_	_		_		_							
City					State		Ziç	Р			Cour	ntry			Applicat Authorit	nt y			
	Addit	ional i	inv r	ntors are being	named	on supple	eme	:nta	l shee!	i(s) a	attache	d h	ereto						